



PTO/SB/21 (09-04)

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

17

Application Number

09/757,774

Filing Date

January 9, 2001

First Named Inventor

Howard M. Dintzis

Art Unit

1646

Examiner Name

David A. Saunders, Ph.D.

Attorney Docket Number

041828-0276361

**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Request for Continued Examination (RCE); Postcard Receipt	
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Pillsbury Winthrop LLP		
Signature			
Printed name	Donna O. Perdue, Ph.D.		
Date	October 29, 2004	Reg. No.	51166

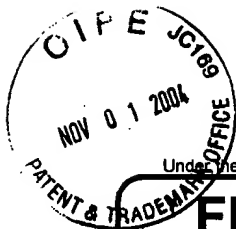
**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Sachiko Y. Snedden	Date	October 29, 2004

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PTO/SB/17 (10-03)  
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# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ ) 1,570.00

## Complete if Known

Application Number	09/757,774
Filing Date	January 9, 2001
First Named Inventor	Howard M. Dintzis
Examiner Name	David A. Saunders, Ph.D.
Art Unit	1646
Attorney Docket No.	041828-0276361

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number: 502212  
Deposit Account Name: PILLSBURY WINTHROP LLP

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1001	770	2001 385 Utility filing fee	
		1002	340	2002 170 Design filing fee	
		1003	530	2003 265 Plant filing fee	
		1004	770	2004 385 Reissue filing fee	
		1005	160	2005 80 Provisional filing fee	
SUBTOTAL (1)					(\$ ) 0.00

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims:  -20\*\* =  X  =   
Independent Claims:  -3\*\* =  X  =   
Multiple Dependent:  =

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1202	18	2202 9 Claims in excess of 20	
		1201	86	2201 43 Independent claims in excess of 3	
		1203	290	2203 145 Multiple dependent claim, if not paid	
		1204	86	2204 43 ** Reissue independent claims over original patent	
		1205	18	2205 9 ** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(\$ ) 0.00

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1051	130	2051 65 Surcharge - late filing fee or oath	
		1052	50	2052 25 Surcharge - late provisional filing fee or cover sheet	
		1053	130	1053 130 Non-English specification	
		1812	2,520	1812 2,520 For filing a request for ex parte reexamination	
		1804	920*	1804 920* Requesting publication of SIR prior to Examiner action	
		1805	1,840*	1805 1,840* Requesting publication of SIR after Examiner action	
		1251	110	2251 55 Extension for reply within first month	
		1252	420	2252 210 Extension for reply within second month	
		1253	950	2253 475 Extension for reply within third month	490.00
		1254	1,480	2254 740 Extension for reply within fourth month	
		1255	2,010	2255 1,005 Extension for reply within fifth month	
		1401	330	2401 165 Notice of Appeal	
		1402	330	2402 165 Filing brief in support of an appeal	
		1403	290	2403 145 Request for oral hearing	
		1451	1,510	1451 1,510 Petition to institute a public use proceeding	
		1452	110	2452 55 Petition to revive - unavoidable	
		1453	1,330	2453 665 Petition to revive - unintentional	685.00
		1501	1,330	2501 665 Utility issue fee (or reissue)	
		1502	480	2502 240 Design issue fee	
		1503	640	2503 320 Plant issue fee	
		1460	130	1460 130 Petitions to the Commissioner	
		1807	50	1807 50 Processing fee under 37 CFR 1.17(q)	
		1806	180	1806 180 Submission of Information Disclosure Stmt	
		8021	40	8021 40 Recording each patent assignment per property (times number of properties)	
		1809	770	2809 385 Filing a submission after final rejection (37 CFR 1.129(a))	
		1810	770	2810 385 For each additional invention to be examined (37 CFR 1.129(b))	
		1801	770	2801 385 Request for Continued Examination (RCE)	395.00
		1802	900	1802 900 Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ ) 1,570.00

## SUBMITTED BY

Name (Print/Type)	Donna O. Perdue	Registration No. (Attorney/Agent)	51166	Telephone	858. 509.4093
Signature		Date	October 29, 2004		

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